SERVICE-AT-A-GLANCE

(MGH) Emergency (ER)

Location – Are you located on one floor or in several locations in the hospital?
- 1st floor

Population – Describe in point form the characteristics of the patient population.
- Trauma patient
- Elderly population
- Mild TBI
- EtOH abuse

Age range
- 18 and up

Impact of illness/injury

Medications: be aware of their indications as well as side effects affecting functions and precautions
- Lasix
- Seroquel
- Dilaudid

Role – Describe the role of your service in point form.
- Swallowing Ax
- Functional Ax + assistance with d/c planning
- Cognitive appreciation and driving screen
- Positioning (splint)
- Continuity of care (rehab/convalescence/homecare/community/LTC/palliative)
- Decision of admission or not

Team and Key Contacts – Indicate if you work in a multidisciplinary team; who are the key players, staff doctors, consulting CNS’s and other specialists.

- Unit Coordinator: #42202 #42201 #42772
- Head Nurse:
- Assistant Head Nurse:
- Liaison Nurse: 42696
- Geriatric Liaison Nurse: 45550
- CNS Nurse: 42464
- OT: pager: 514-406-5948
- PT: pager: 514-406-0723
- SLP: ext: pager: 514-406-
- SW:
- Dietician: ext:

Rounds – List the day(s), hours and location(s) of the clinical rounds for your service.
- Monday to Friday at 8am: OT not oblige to go
- Geriatric ER rounds: Monday to Friday at 10am in Consultants room
**Medical Tests** – *Describe in point form the principle/most frequent risk factors that you assess specifically related to your patient population.*

- CT head
- X-rays
- EEG
- EKG
- Chest x-ray
- MRI

**Assessments** - *Describe in point form the principle/most frequent forms that you complete specifically related to your patient population in addition to the psychosocial assessment.*

- MoCA
- Bell’s test

**Resources** - *Describe in point form the principle/most frequent hospital and community resources that you allocate specifically related to your patient population.*

- Resources for Alzheimer’s society
- MAB
- DSIE

**“Insider” Info** – *List any tips, cautions, fast-tracks, templates or lists that would help facilitate a quick-start for someone new to this service.*

- Need Med-Urgent access to print consult and sign off on consult
- The Unit Coordinator pages OT when new consult is entered but it is a good idea to check at lunch time